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PETITION FOR EXTENSION E UNDER 37 CFR 1.136(a)			Α	Attorney Docket No. 9988.058.00		
In re Application of LEE, Soon Jo						
	Application Nun	nber		Filed		
	1	0/663,997		Sep	tember 17, 2003	
	For: TOP CO	OVER STRUCTUR	RE FOF	R A CLOTHE	S DRYER	
	Art Unit	3749	Exam	iner	S.M. Gravini	
This is a request under the provisions identified application.						
The requested extension and appropri	iate non-small-en	tity fee are as follo	ws (ch	eck time per	iod desired):	
X One month (37 CFR 1.17	(a)(1))			\$	120.00	
Two months (37 CFR 1.1	7(a)(2))			\$		
Three months (37 CFR 1.	.17(a)(3))			\$		
Four months (37 CFR 1.17(a)(4)) \$						
Five months (37 CFR 1.17(a)(5))				\$		
Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$						
X A check in the amount of the fe	X A check in the amount of the fee is enclosed.					
Payment by credit card. Form PTO-2038 is attached.						
The Director has already been authorized to charge fees in this application to a Deposit Account.						
The Director is hereby authorized to charge any additional fees, or credit any overpayments, to Deposit Account No. 50-0911. A duplicate copy of this sheet is enclosed.						
l am the applicant/inventor.						
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).						
attorney or agent of record. Registration Number						
X attorney or agent under 37 CFR 1.34(a).						
Registration number	er if acting under 37			2,766	- Rey. No-	
February 28, 2006		<u>Vale</u>	rie	P. Hay	1es 53,005	
Date (200) 400 7540			Λ.	Signature	<i>)</i>	
(202) 496-7513 Telephone Number			Type	Signature Signature Mark R. Kres ed or printed	name	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below						
Total of	forms are submitte	ed.				
		92/	01/2000	JADDO1 0	0000008 10663997	

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120.00 OP

PTO/SB/17 (12-04)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
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number

Fee pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known			
		Application Number	10/663,997		
FEE TRAN	SWILLAL	Filing Date	September 17, 2003		
FOR FY	/ 2005	First Named Inventor	LEE, Soon Jo		
FURF	2005	Examiner Name	S.M. Gravini		
☐ Applicant claims small entity status. See 37 CFR 1.27		Art Unit	3749		
TOTAL AMOUNT OF PAYMENT	(\$) 120.00	Attorney Docket No.	9988.058.00		

METHOD OF PAYMENT	check all that ar	oply)						
⊠ Check □ Cred	lit Card	Money Order	☐ None	☐ Other (please	e identify):			
☐ Deposit Account	☑ Deposit .	Account Number	r <u>50-0911</u>	☐ Deposit Accou	ınt Name:			
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee								
□ Charge any addition	nal fee(s) or und	erpayments of fee	(s) [☑ Credit any overpa	ayments			
under 37 CFR 1.16 a								
WARNING: Information on to information and authorization	his form may b on on PTO-2038	ecome public. Cr	redit card infor	mation should not	be included on	this form. Pro	ovide credi	t card
FEE CALCULATION								
1. BASIC FILING, SEARC	CH, AND EXA	MINATION FEE	S					
	FILING		SEARCH			TION FEES Small Entity		
Application Type	Fee (\$)	Small Entity Fee (\$)	<u>Fee (\$)</u>	Small Entity Fee (\$)	Fee (\$)	Fee (\$)		Fees Paid (\$)
Utility	300	150	500	250	200	100	-	
Design	200	100	100	50	130	65	-	
Plant	200	100	300	150	160	80	_	
Reissue	300	150	500	250	600	300	_	
Provisional	200	100	0	0	0	0	-	
2. EXCESS CLAIM FEES Small Entity								
Fee Description Each claim over 20 or, for I	Reissues, eac	th claim over 20	and more than	n in the original pa	atent		Fee (\$) 50	<u>Fee (\$)</u> 25
Each independent claim ov	ver 3 or, for Re					ent	200 360	100 180
Multiple dependent claims Total Claims E	extra Claims	Fee (\$)	Fee Pa	aid (\$)	Multi	ple Depende		
- 20 or HP =		x				e (\$)	Fee Paid	•
HP = highest number of total c			Fac D	-:-! / # }				
<u>Indep. Claims</u> <u>E</u> 3 or HP =	xtra Claims	Fee (\$) x	Fee Pa 	,				
HP = highest number of indepe								
3. APPLICATION SIZE FE					1- 00E0 (04)	~= (11	***	
If the specification and draw 50 sheets or fraction t	wings exceed thereof. See ?	100 sheets of pa 35 U.S.C. 41 (a)/	aper, the appii (1)(G) and 37	ication size ree au CFR 1.16(s).	ie is \$250 (\$12	25 for small er	ntity) for ea	ach additional
Total Sheets Ext	tra Sheets	Number of eac	ch additional 50	0 or fraction thereo	• • • • • • • • • • • • • • • • • • • •) _	Fee Paid ((\$)
- 100 = 4. OTHER FEE(S)	/ 50 :	=	(round up to a	a whole number)	х	_ =	Fee Paid	 ;
Other: Petition for Ex	tension of Tim	ne (One Month)					\$ 120.00	<u>751</u>
Other:								

SUBMITTED	BY		
Signature	Valerie P. Haues 53,005	Registration No. (Attorney/Agent)	Telephone (202) 496-7513
Name (Print/Type)	Mark R. Krestoff	42,766	Date February 28, 2006

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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